



MEDICAL MINUTE

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November 2001

Diabetes camp helps create independence

Margaret Tippy

TAMC Public Affairs Officer

"One more thing," said Austin McElmurry, 7, with his twinkling, little-boy eyes and a huge smile. "It was fun!!! I didn't want to come home."

Looking as innocent as can be, he squirmed to try and sit still on the family sofa. But Austin isn't innocent about diabetes. He has Type 1 Diabetes, and his "great" experience was attending He Ola Ke Keiki — a weeklong diabetes camp for children and teens at Camp Erdman this summer. The camp was run by volunteers like Hope Cooper-Oliver, an Advanced Practice Registered Nurse (APRN) and a Certified Diabetes Educator (CDE), at Tripler Army Medical Center. The American Diabetes Association sponsors the camp.

"It was a really good experience for him," said Tonya Thatcher, Austin's mother. "It taught him so much about diabetes. And, it helped him know that he wasn't alone."

"He's the only student at his school (Lehua Elementary) who has diabetes and that's really

See **DIABETES**, page 8



Staff Sgt. Michelle J. Rowan

HALLOWEEN VISITORS

Human Animal Bond Program volunteer John Magin and his dogs, Willem and Fritz, visit with patient Samuel Manning during a Halloween party on Tripler's Pediatric Ward. For more on the Halloween festivities, see page 6.

Hawaii, Thai doctors share dengue fever data

Staff Sgt. Michelle J. Rowan
Editor

As the number of confirmed dengue fever cases in Hawaii rose to more than 50, about that many medical professionals from across the state gathered in a Tripler Army Medical Center conference room Oct. 17 to take part in an information exchange with medical personnel thousands of miles away who are very familiar with the disease.

Through a video teleconference, Hawaii-based personnel from Tripler, the State Department of Health and Center for Excellence in Disaster Management and Humanitarian Assistance (COE) discussed topics involving dengue fever with medical personnel in Thailand.

Participating organizations in the Asian nation included the Royal Thai Army, the Armed Forces Research Institute of Medical Sciences (AFRIMS) in Bangkok and the Queen Sirikit National Institute of

Child Health.

"Dengue is a new problem for Hawaii, but it is not new to Thailand," said Col. (Dr.) Dale S. Vincent, chief of Tripler's Department of Medicine. "This telemedicine conference is the perfect opportunity for us to bring world-class expertise from Bangkok to our doorstep."

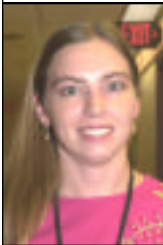
After opening remarks, Dr. Paul Effler, state epidemiologist with the Department

See **DENGUE**, page 3

FEEDBACK

A place to voice your opinion

What are you most thankful for this Thanksgiving?



Temperance Rubio, Department of Preventive Medicine — "I am thankful for my health and my son, Elijah."

George E. Robinson, Healthcare Equipment Management Branch — "I am thankful for the blessings God has given me as an American."



Kelley Lee, Department of Pediatrics — "I am thankful for the time I spend with the children here at Tripler and my new family at home."

Hermes Gonzalez, Healthcare Equipment Management Branch — "I am thankful that God has given me the opportunity to have and enjoy my family and life. Thank you God."



Sgt. 1st Class Rachel Goeckeritz, Central Pacific District Veterinary Command — "I am thankful that I am with my family, and for the freedom our country protects."

"Lights, Camera, JCAHO ..."

Are you prepared?

Quality Services Division

Infection Control Issues

Q. What are Standard Precautions?

A. Standard Precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in the hospital. Standard Precautions apply to all patients, regardless of their diagnosis. Standard Precautions expands the coverage of Universal Precautions by recognizing that any body fluid may contain contagious microorganisms.

Use Standard Precautions when contact with any of the following is anticipated: blood; all body fluids, secretions, and excretions except sweat, regardless of whether or not they contain visible blood; nonintact skin; and, mucous membranes.

Q. What type of surveillance does infection control perform?

A. Infection Control performs priority-

directed or targeted surveillance focusing on certain high-risk patient populations, procedures, or units on a planned basis depending on the objectives of the infection control program. Currently, surveillance is being conducted in the Critical Care Units and Orthopedic surgical procedures.

Q. What are some of the practice measures taken for infection control?

- * Good hand washing practice
- * Use of Standard Precautions in conjunction with Isolation Precautions (Airborne, Contact and Droplet)
- * The use of Personal Protective Equipment (Gloves, Gowns, Eye Protection).
- * Needle/sharp safety
- * Appropriate decontamination/sterilization practices

Infection Control is everyone's responsibility. Breaches in infection control practices should be brought to the attention of the involved individual.

Patient Confidentiality Issues

Q. Who is responsible for protecting the confidentiality of patient and hospital information?

A. EVERYONE!

Q. When are staff instructed on the hospital's confidentiality policies?

A. During the initial orientation program and is repeated during Birth Month Annual Review (BMAR) and on CHCS screens and printouts. Keep patient information confidential. Never leave unattended your computer screen or reports from a printer or patient charts.

Do not talk about patients in public areas such as the elevator or Dining Facility.

Q. What confidential information may I look at?

A. None, unless such information is necessary for completion of your job duties.

CSM's HANDSHAKE OF CONCERN



November
"100-percent supervisor review and update of Human Resources competency files"

Medical Minute

<http://www.tamc.amedd.army.mil>

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Photos by Staff Sgt. Michelle J. Rowan

TO THE RESCUE

During a scheduled mass casualty exercise Oct. 12, Spc. Javier Dibbrell (at left) helps transport a patient through Tripler's Emergency Room. Above, Sgt. Eliuth Moreno checks out one of the injured soldiers at Tripler's Physical Fitness Center, which served as the site of this year's exercise scenario. The exercise was conducted in accordance with Joint Commission on Accreditation of Healthcare Organizations standards.

DENGUE: Staff, Thai engage in monthly sessions

Continued from page 1

of Health, brought the participants up to speed on the dengue fever outbreak in Hawaii. At the time of the conference, the health department had a total of 59 confirmed dengue cases with six on Oahu and 49 on Maui.

The three-hour symposium continued with presentations from both Hawaii and Thai personnel on the symptoms, diagnosis and treatment protocols for the viral infection as well as progress in vaccine development and vector control programs.

The symposium was conducted through an established link Tripler has with the Royal Thai Army called Project THAI-HI, a program where Tripler staff, residents and students engage in monthly learning sessions with Thai army physicians and medical students.

"This dengue conference is the first time we have utilized our telemedicine links to address a major, new health



Staff Sgt. Michelle J. Rowan

State Epidemiologist Dr. Paul Effler gives the local and Thai audiences an overview of the Dengue outbreak in Hawaii during the symposium.

problem for Hawaii," said Vincent. "With the current anxiety and cost associated with air travel, the conference would not have taken place without our telemedicine link.

"We anticipate that our strong ties with the Phramongkutklao Medical Center of the Royal Thai Army will be able to be used in many creative ways in the future," he said.

COMMENTARY

Ecstasy: Drug presents more dangers to user, command than most realize

Lt. Col. Mark R. Bruins, Ph.D

Commander, Forensic Toxicology Drug Testing Laboratory

There have been a number of articles and commentaries in local newspapers concerning the drug Ecstasy. These articles appear to be sincere attempts to discuss the dangers of Ecstasy use, however, some statements are incorrect or misrepresented. Some have confused Ecstasy with Methamphetamine while others have presented an extreme and unrealistic view of the dangers of the drug. It's time for some straight talk and information regarding Ecstasy and the dangers it presents to soldiers, NCOs and commanders.

First, Ecstasy is not Methamphetamine; the two are members of the Amphetamine family of drugs but are structurally different. Methamphetamine is known by street names such as "ice" or "crystal meth," while Ecstasy has been called "E," "X," "XTC" or "ADAM." Methamphetamine purity is higher in "ice" than "crystal meth."

Ecstasy and Methamphetamine are central nervous system stimulants that work by increasing the release of certain chemicals in the brain or by prolonging their action. Ecstasy and Methamphetamine cause some of the same effects, but there are a few important differences. Ecstasy has more of an effect on a chemical in the brain responsible for pleasure and sensory perception.

Ecstasy users report that colors and sounds come alive and they feel more sympathetic and loving towards others. It is referred to as the "love or hug drug" because it promotes social interaction or as users like to say "PLUHry" – peace, love, unity and harmony. Ecstasy is popular because it is cheap, easy to use (swallowed and doesn't require needles or pipes), and it produces a long lasting high. The drug easily fits into the "Rave" scene where groups of people come together to socialize, dance and have a good time. A couple of hits of Ecstasy can be cheaper than a night of heavy drinking, and unlike alcohol it allows the user to participate in the party for hours on end. Addiction to Ecstasy is uncommon because repeated use does not prolong the pleasurable effects. The brain runs low of chemicals affected by Ecstasy and needs time to produce more.

Methamphetamine on the other hand can be smoked, ingested or injected and is addictive. Since Methamphetamine affects the brain in a slightly different way, some experienced users will prolong their high by taking this drug when they start coming down from Ecstasy. Coming up positive for both Ecstasy and Methamphetamine may be one sign to commanders and NCOs that

a soldier is more than just the casual Ecstasy user.

Some news articles give the impression that Ecstasy causes instant brain damage turning a person into a vegetable. While it does affect the brain, the damage is subtle and usually occurs over time with repeated use. Studies in humans show slight changes in memory, attention and a reduction in reaction time. This can occur in persons using Ecstasy as little as two to three times a month. These studies also suggest that the more you use Ecstasy the greater the long-term affects. While it is true that there have been deaths associated with Ecstasy, these are usually a result of extreme use, dehydration, accidents or in persons with underlying problems like heart abnormalities.

Deaths from dehydration is the major concern as body temperatures can rise above 104 degrees in persons who don't keep themselves hydrated. The Rave party scene is one of intense activity, and Ecstasy users can quickly become dehydrated as they dance for several hours on end. Some party organizers recognize this and set-up water stations and rest areas because they are interested in repeat customers.

One thing that amazes me about Ecstasy and drug users in general is the trust users place in the drug dealer. Drug users blindly believe that the pill they are popping into their mouth is what the dealer says it is. Six people in Florida and three in Illinois did, and they died from using drugs they thought were Ecstasy but were really PMA and PMMA; two other drugs in the Amphetamine family. This illustrates one of the extreme dangers of Ecstasy and drug use. Because these drugs are not made under government standards, some have toxic by-products in them or are laced with other drugs such as cocaine, caffeine or PCP.

A cocktail of cocaine and Ecstasy is a recipe for disaster to someone with underlying heart problems. Drug dealers want to keep their customers coming back for more, but do they really know how the drug was made or what is in it? Taking Ecstasy is not like taking a prescription pill from the medicine cabinet. Ecstasy manufacturing is illegal and the people who make it are in it for the money; safe manufacturing processes usually don't cross their mind. Some Ecstasy users are lured into thinking that certain brands or symbols on the pill mean that it's the real stuff, but anyone can stamp a logo on a pill.

One drug dealer was recently apprehended with pills he was going to sell as Ecstasy but were really herbal supplements for menopausal women. Taking Ecstasy is like Russian roulette; the chamber might be empty or it might have a round in it in the form of PMMA or other toxic chemicals.

The real issue for commanders and NCOs to consider regarding

“If we continue to conduct Monday and after-holiday testing and give soldiers advance notice of urinalysis collection, experienced drug users will continue to beat the system and present a danger to themselves and others.”

— Lt. Col. Mark R. Bruins

Commander, Forensic Toxicology Drug Testing Laboratory



IN TRAINING

Members of the Pacific Regional Medical Command's Special Medical Augmentation Response Team (SMART) augmented the Hawaii Army National Guard's 93rd Weapons of Mass Destruction - Civil Support Team during a weeklong exercise at Aloha Stadium Oct. 29-Nov. 2. The exercise tested the National Guard unit's response to several scenarios involving unknown agents.

During one of the scenarios (above), personnel from the 93rd and SMART NBC team help a soldier who had become a heat casualty. At right, Spc. Dassita Dixon of Tripler's Department of Preventive Medicine sprays down one of the National Guard soldiers who came into contact with the unknown agent.



Photos by Staff Sgt. Michelle J. Rowan

ECSTASY: Tripler lab confirms presence of drugs

Continued from page 4

Ecstasy lies with its impairment of judgment and fatigue. When a person is on Ecstasy they are not thinking like you and me. Their reaction time, visual perception and judgment are impaired. Like any person on drugs, we don't want them driving an automobile, operating heavy machinery or using a weapon.

Since the Ecstasy high can last four to six hours, a soldier heading out to the range or turning a wrench may still be experiencing the effects of the drug at morning formation after a late night of partying. The problem doesn't stop once a person comes down from the high.

With every high there is a low, and Ecstasy is no exception. The effects after the soldier comes down from the high should concern commanders and NCOs. Drowsiness, fatigue, insomnia and difficulty concentrating are effects that can

last up to 24 hours after Ecstasy use. Because fatigue is a common cause of accidents, we may never know how much Ecstasy use contributes to these situations unless of course you are a pilot who is tested after every accident.

Testing and education, therefore, are the keys to deterring Ecstasy use. Because Ecstasy has a short detection window of one to three days, the traditional Monday and after every holiday urinalysis test is not going to cut it. If a person uses Ecstasy on Friday, they will most likely be negative by Monday. Ecstasy users are well aware of this because there are dozens of Internet sites devoted to helping drug users beat urinalysis tests.

The Tripler Forensic Toxicology Drug Testing Laboratory, on the other hand, is devoted to helping commanders and NCOs deter drug use. We have been confirming the presence of Ecstasy in urine specimens since 1995. Currently, we screen all urine

specimens for drugs in the Amphetamine family and confirm the presence and quantity of Ecstasy using the most advanced scientific methods.

In the coming year, we will use new testing kits that are more specific for detecting Ecstasy. These new methods will allow us to lower the cut-off for a positive drug test and expand the time window for detecting the drug. All of these advancements, however, are only as good as the urinalysis sample. If we continue to conduct Monday and after-holiday testing and give soldiers advance notice of urinalysis collection, experienced drug users will continue to beat the system and present a danger to themselves and others.

The Department of Defense drug deterrence program works if we educate soldiers with accurate information and establish a truly random urinalysis program.



Capt. (Dr.) Paul Savel gets a high-five from Emily Hyde during the Halloween party on Tripler's Pediatric Ward.



Devan Horning, dressed as Superman for the festivities, checks out one of the treats he picked up trick-or-treating.

HALLOWEEN FUN

Elizabeth Mowbray asks her dog, Charlie Brown, to do a trick for a group of the children. Charlie came to the children's party dressed as the "great pumpkin."



Tripler Army Medical Center's Pediatric Ward hosted a special Halloween party Oct. 31 for those children who had to spend the holiday in the hospital.



The festivities kicked off with a round of trick-or-treating to some of the different areas of the hospital. The children then went back to the Pediatric Ward to take part in games and visits with Human Animal Bond Program volunteers, who dressed up their pets for Halloween.

The patients and pets weren't the only ones donning their favorite costumes, staff members also dressed up for the occasion.

Photos by Staff Sgt. Michelle J. Rowan

Children need more time to play

Certain toys provide stimulation, inspire creativity in children

Capt. (Dr.) Matthew G. Weeks
Schofield Barracks Family Practice Clinic

Creativity is an attribute that offers valuable meaning in a developing child. By definition, a creative child is one who shows artistic and intellectual inventiveness. The realization of raising creative children and stimulating their imagination and inventive powers may be best accomplished the "old fashioned way." This article draws careful consideration to the practice of developing childhood imagination through increasing unstructured play, careful toy selection, and decreasing or eliminating television.

According to University of Michigan researchers, in 1981, the average school-age child had 40 percent of the day for free time – meaning hours left over after sleeping, eating, studying and engaging in organized activities. By 1997, the figure was down to 25 percent.

Where has all the playtime gone? It seems that in their quest to attain near-perfect children, parents are turning childhood into a busy apprentice adulthood. Children are so occupied with homework, soccer practice, music lessons and other activities that their schedule allows little time to play. Alvin Rosenfeld, co-author of *The Over-Scheduled Child: Avoiding the Hyper-Parenting Trap*, says a healthy amount of unstructured play is required to make kids happy, healthy and human. Play is joyful and emotionally nourishing, and it may make kids smarter.

Besides increasing unstructured play, another mode of inspiring creativity in children is through careful toy selection. Modern-day, worried parents are often victims to slick marketers who sell everything imaginable to stimulate their babies' brains. Child-development experts consider products purchased to stimulate babies' brains far inferior to more social and emotional activities such as talking with or reading to children. These specialists agree that the only thing shown to optimize children's intellectual potential is a secure, trusting relationship with their parents. Time spent cuddling, gazing and playing establishes a bond of security, trust, and respect on which the entire child-development pyramid is based. Child development expert T.

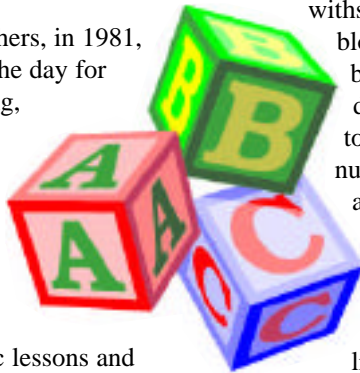
Berry Brazelton says "intelligence is based on emotional adequacy."

Parenting expert John Rosemond states that "too many toys overwhelm a child's ability to make creative decisions. The child "can't decide what to do next because the clutter presents too many options." Rosemond recommends "eliminating unnecessary toys" and relates four qualities that make "a good toy."

First, a good toy presents a wide range of creative possibilities. It is capable of being many things, as defined by the child's imagination, rather than one thing, as defined by the manufacturer. Second, it encourages manipulation. It can be taken apart and put together in various ways. Toys of this kind hold a child's interest because they stimulate creative behavior. Third, it is age appropriate. Fourth, it is durable and will withstand lots of abuse. Examples of such toys include blocks, electric trains, cars, small plastic figures (a bag of plastic army men or cowboys and Indians), dolls, dollhouses and marbles. For older children, toys should be purchased which may form the nucleus of a hobby, such as chemistry sets, telescopes and microscopes, rock-collecting sets, and models.

Since 1955, when American children began watching significant amounts of television, scholastic achievement scores have steadily declined. Many experts feel that the decline in literacy and academic standards since 1955 has been dramatically influenced by the passive, creativity-depriving act of watching television. Rosemond relates that it is not only the content of the television program that may be detrimental, but also the "process" of watching television. "Television watching inhibits the development of initiative, curiosity, resourcefulness, creativity, motivation, imagination, reasoning and problem-solving abilities, communication skills, social skills, fine and gross motor skills, and eye-hand coordination." He further warns that television can be addictive and when withdrawn can incite a predictable uprising. Perhaps, in an attempt to stimulate the imagination, an appropriate approach includes more restrictive parental measures on simply the amount of television a child views per day or per week.

Healthcare providers have valuable resources at their disposal to assist parents with parenting issues to include the focus of this article, stimulating creativity. Parents and families are encouraged to seek assistance from their Primary Care Manager in realizing total family health.



Tripler Army Medical Center outpatient clinics will be closed Nov. 22 in celebration of Thanksgiving. Many of the clinics will also be closed or have limited hours on Nov. 23, a training holiday.

For more information, call your Primary Care Clinic. If you have an emergency, which is any threat to life, limb or eyesight, go to the nearest emergency room or call 911.

DIABETES: Camp needs volunteers

Continued from page 1

hard on him," Thatcher said. "He's constantly asking me 'Why is this happening to me?'"

"So this camp was a Godsend – spending an entire week with children who are dealing with the disease," she said. "I am so impressed with what is offered here - from the camp to a support group that meets once a month."

"It helps the whole family deal with it," Thatcher said. "We need support as much as he does."

The whole family includes her two other sons, Hunter, 2, and Tristan, 9 months, and husband, Navy Petty Officer 2nd Class James Thatcher, with Naval Security Group Activity – Kunia Regional Operations Center.

Austin is one of approximately 50 children fortunate enough to attend He Ola Ke Keiki, which is Hawaiian for "The Child Shall Live." The name was given to the camp by a Hawaiian Kupuna or Respected Elder who was asked to name the camp many years ago, said Dr. Jane Kadohiro, the camp director for more than 20 years and a professor at the University of Hawaii's School of Nursing – Manoa.

"I have worked with camps both nationally and internationally, and this is one of the greatest things in the world for children with diabetes," said Kadohiro who has had Type I diabetes for 47 years.

"Camp really changes their lives," she said. "Often, it is the first time the children are meeting other children who have diabetes. Many times these children are the only ones in their entire school with diabetes."

One of the camp's many goals is to "give the kids a vacation from their parents and give the parents a vacation from the kids with no love lost," she said laughing.

The camp's philosophy is also to help create independence for the children who are in age groups from first grade to senior year of high school.

"Children have a healthy, normal, wholesome experience hiking, swimming, doing arts and crafts just like any summer camp," Kadohiro said, "and they also have learning time by age groups."

"They have lots of things to eat with a well-trained and professional staff with expertise in diabetes monitoring their blood sugar swings with all the activities and assuring the children are in a safe setting," she said. "We have almost a one-to-one ratio between staff and children."

The last day of the five-day camp is Parent's Day. Parents come out to Mokule'ia on the North Shore and can swim, have lunch and celebrate with their children.

"We welcome the parents to come out and join us for Parent's Day," Kadohiro said.

The camp was created by a group of philanthropic women for children with diabetes many years ago. Kadohiro helped found the American Diabetes Association (ADA) in Hawaii in 1977 and eventually the camp came under its auspices.

Cost of the camp to parents is \$250 per child who is a non-



Courtesy Photo

Austin McElmurry (front center) hams it up with friends at He Ola Ke Keiki — a weeklong diabetes camp.

member of ADA, and \$200 for members, she said. Actual cost is more than \$600 per child, and they are always looking for donations and great volunteers.

"Often, we will have children come back to be counselors who had attended camp in the past," Kadohiro said laughing. "They want to give back to the new group of children."

Approximately 35 to 40 percent of the children are from neighbor islands, and about 40 to 50 percent of the children are return campers, she said.

Health professional volunteers who are dietitians, social workers and nurses are always needed. Cabin counselors – half who have diabetes and half who do not – is the right mix for the children, and of course, they must be good role models and good with kids, she said.

"The counselors who have diabetes can teach the non-diabetic counselors about diabetes," Kadohiro said.

"We also need an Activities Director – someone who is versatile and with a creative imagination to keep things moving," Kadohiro said.

For more information about the camp, the ADA may be reached at 947-5957. Individuals or groups interested in donating funds to assist children in attending next year's camp may send donations to:

Sherin Croft-Lashley

Tripler's Children With Diabetes Support Group
Coordinator

1726 Porter Avenue

Honolulu, HI 96818

"It's important that our military children have access to camp and our support group which normally meets monthly," Croft-Lashley said. "We are currently planning our December Get Together."

For more information about what Tripler offers for those diagnosed with diabetes, the Health Promotion Office may be reached at 433-2565.

Tis the season ...

Nutritionist offers holiday nutrition tips

Capt. Amanda Sylvie
Nutrition Care Division

With the beginning of the 2001 holiday season, you may notice the dietary challenges that begin appearing on a daily basis. Here are a few ideas for "holiday survival" that may help you end the holidays feeling healthier and more "nutritionally well" than when the holidays began.

"First Aid Kit" for Holiday Survival

- * Take low fat snacks along when shopping to prevent yourself from overeating at fast food in the malls.

- * Add 15 minutes to your exercise routine. Make walking before or after your holiday meal a new tradition.

- * Drink 8 ounces of water and two servings of vegetables an hour before a holiday party. Bring a healthy item to parties. Socialize and focus on people rather than the food.

- * Keep in mind when eating at buffets that small "tastes" may add up to a lot of high-calorie food.

Cooking Techniques & Recipe Modification

Fat free products do not automatically decrease caloric content. Choose lower-fat or fat-free dairy products, meat items, and condiments such as mayonnaise and margarine. However, fat-free desserts like cookies may not save many calories. To lighten the calories in your favorite holiday foods, try some of the following

ideas:

- * Light, dessert-style yogurts (ex. coconut cream pie) as a fresh fruit or pie topping.

- * Use applesauce or Lighter Bake to replace fat in brownies, muffins, quick breads.

- * Choose reduced-fat pie crusts and fat free sweetened condensed milk.

- * Use seasonal vegetables and fruits: winter squash, brussel sprouts (great when topped w/ teriyaki sauce), pumpkins, and cranberries (add to sauces, muffins, and sweet breads).

- * Look for low-sodium sauces, bouillons and soups.

- * Substitute applesauce for the margarine (may need to slightly reduce liquid used in the recipe) in stuffing mixes.

- * For small dinners, choose a turkey breast rather than cooking a whole turkey.

It is always fun to surprise your family with tasty creations from the kitchen. Start out by serving delicious spreads such as apple butter, roasted garlic or pumpkin butter over warm multi-grain bread. To lighten the mashed potatoes, use Butter Buds or Molly McButter and evaporated skim milk. Horseradish and/or garlic provide a rich flavor for your mashed potatoes, also. Hot apple cider provides a sensational aroma and is lower in fat and calories than liquors or eggnog.

For more information, call the Nutrition Clinic at 433-4950.

Tripler opens refill pharmacy in Navy housing area

Suzan Holl
TAMC Public Affairs Office

Tripler Army Medical Center's Consolidated Refill Pharmacy officially opened for business Nov. 6.

The refill pharmacy was created to help alleviate traffic congestion for those entering military installations where heightened security measures are in place. At Tripler, increased security measures have reduced the number of available parking spaces for patients and staff to park in.

Access to the refill pharmacy is easy, officials said. There are no hills or steps to climb and parking is right outside the door.

"Going to Tripler can be quite a walk for me," said retiree Thomas Danielson, who uses a cane. "I usually pick my prescriptions up at the Makalapa Clinic but this is much easier."

The location of the refill pharmacy is perfect for Navy Petty Officer First Class Leslie Thomas, who lives in nearby

Radford Terrace.

"I think this is great," Thomas said, "I can just swing by on my way home from work. It's like having a mini drug store right in my neighborhood."

Beaudoin said that the refill pharmacy has a steady flow of about 40 to 50 customers a day representing all branches of service and military retirees.

"That's 40 or 50 less cars in line to get into Tripler," Beaudoin said.

The refill pharmacy is located at 3189 Nimitz Road, Building 4, just off Nimitz Highway, between Camp Catlin and Peltier Roads. Beaudoin said the current location on Nimitz Road is temporary, and a permanent site will be located within the new Navy Exchange due to open in 2002.

The refill pharmacy site is open weekdays 10 a.m. to 6 p.m. excluding federal holidays. The site is for refills only, which must be called in the working day prior to pick up. To order refill prescriptions for pick up at the new site,



Suzan Holl

Maj. Gen. Nancy R. Adams and Col. Dennis R. Beaudoin open the Consolidated Refill Pharmacy.

call the Department of Defense Consolidated Pharmacy Phone System at 433-6962.

If patients have questions about the new pick-up site, please call the Tripler Army Medical Center Pharmacy at 433-7883.

MINISTRY MOMENT

Department says farewell to chaplain

Chaplain (Maj.) Michael Brainerd
Department of Ministry and Pastoral Care

This past July, Chaplain (Capt.) Albert Ghergich wrote a piece using an old Beatles song, "Hello Hello." Well, we in the DMPC spent some time saying "goodbye" to one of our own, who in turn was saying "hello" to retirement. Chaplain (Maj.) Gregg Hickman retired this past month and left quite a sense of loss in many of our hearts. He and his wife, Juanita, were absolutely crucial in the life of our department, and they will be sorely missed.

Gregg spent just over 20 years in the U.S. Army serving in the Chaplain Corps, first as an assistant and secondly as a chaplain. His ministry throughout TAMC and on the wards was certainly welcomed by staff and patients alike. Gregg also served as the senior pastor



Hickman

for the TAMC protestant service. Through his spiritual guidance and leadership, the protestant service grew more than it had in many years. An old German proverb says, "When one helps another, both are strong." Indeed this was the way Chaplain Hickman spent the bulk of his days, helping just about everyone he came in contact with making the team all the more enduring. This is what our Lord calls us to do and to be, a faithful servant, serving your fellow man.

On the day we all are completing the task or perhaps retiring from our service to our country, my hope would be that the Lord could look down upon us and

say, "Well done good and faithful servant." Here lies the success of our brother Gregg Hickman. Let us all pray for his continued success as he now serves outside of the Army continuing in God's work in his life. God speed Gregg.

say, "Well done good and faithful servant." Here lies the success of our brother Gregg Hickman. Let us all pray for his continued success as he now serves outside of the Army continuing in God's work in his life. God speed Gregg.

Chapel Worship Services

Catholic Services

Daily (M-F) — Noon

Saturday — 5 p.m.

Sunday — 11 a.m.

Thanksgiving Day — 9 a.m.

Protestant Services

Sunday — 9 a.m.

For other religious groups, call 433-5727.

Families can plant trees in honor of children

Suzan Holl
TAMC Public Affairs Office

Capt. Relisa Wilson, a nurse on the mother-baby ward at Tripler Army Medical Center, and her husband, Maj. Richard Wilson, a member of the 25th Infantry Division (Light), Schofield Barracks, were among several parent's who took part in the Keiki Tree program at Kapiolani Park in downtown Honolulu recently.

The Keiki Tree is the city's new tree planting program that plants a tree in honor of every child born in the city and county of Honolulu. The Wilson's had a shower tree planted in honor of their first child, Reana, who was born this past August at Tripler.

Honolulu Mayor Jeremy Harris presented all babies and their parents with an official certificate explaining the type of tree and where it was planted, and a photo of what it will look like when fully grown.

"This special gesture personalizes the importance of trees in our environment," Harris said as he addressed the families. "Trees beautify and protect our soil, landscape and the air we breathe. Each time a tree is planted, like the child it honors, it brings life, beauty and substance to its surroundings."

If you are interested in participating in the program, you



Suzan Holl

Honolulu City Mayor Jeremy Harris tries to comfort 2-month-old Reana Wilson as Capt. Relisa Wilson and Maj. Richard Wilson look on.

can pick up Keiki Tree brochure in Tripler's OB/GYN Clinic or on 5B2 mother-baby unit. You can also call the mayor's office at 547-7772.



Photos by Staff Sgt. Michelle J. Rowan

THE WINNER'S CIRCLE

Re-enlistments

Sgt. Steven O'Neill
 Sgt. Gary Shots
 Sgt. Enoc Santos
 Sgt. Anthony Arongay
 Sgt. 1st Class Deidre Bailey
 Staff Sgt. Jason Santos
 Staff Sgt. Garry Cox
 Sgt. Sherilium George
 Sgt. Donald Scott
 Sgt. Vetineet Jackson
 Spc. Elva Soto-Gonzalez
 Staff Sgt. Vanessa Webster
 Staff Sgt. Toy Hodge
 Staff Sgt. Juan Baez
 Staff Sgt. Ivella Dennis
 Sgt. 1st Class Douglas Zeldon-Castillo
 Sgt. Jannette Shamaly
 Sgt. Msichana Clark
 Sgt. Martha Maynes
 Spc. Matthew Kaylor
 Spc. Jeffrey Boyd
 Spc. David Panaway
 Spc. James Barker
 Sgt. Michael Cullars
 Spc. Donald Ellison
 Sgt. Debbie McMath

Promotions

Master Sgt. Myrna Madrigal

Awards

Navy Capt. Richard Jeffries —
 Legion of Merit
 Maj. Priscilla Patterson —
 Meritorious Service Medal
 Sgt. 1st Class Jerry Shakur —
 MSM
 Staff Sgt. Michael Waldrop — MSM

EMT graduates

Sgt. 1st Class Charles Beard
 Spc. Beau Bergstrom
 Spc. Susan Botai
 Cpl. Richard Cauley
 Staff Sgt. Raoul Clarke
 Sgt. Roger Erismann
 Sgt. Natasha Fenelon
 Tech. Sgt. Michael Fischer
 Staff Sgt. Odessa T. Fisher
 Spc. Carlos Gallardo
 Spc. Kelly Hilson
 QM3 Brandon Jenkins
 Spc. Heidi Lopez
 Spc. Demirce Mays
 Sgt. Efren Mendoza
 Sgt. Manuel Najera
 Spc. Michael Powers
 Spc. Larry Purlee
 Staff Sgt. Larry Robertson
 Sgt. Zachary Simmons
 Cpl. Avag Topachinkyan

CARVING CONTEST

Tripler's Department of Pathology and Area Lab Services conducted a Halloween Pumpkin Carving Contest Oct. 31. Above, Spc. James Piccillo puts the finishing touches on the Blood Donor Center's patriotic entry, which is shown at left. The entry took first place in the most creative category. Other winners included Lt. Col. James Camp, whose entry won the scariest pumpkin category, and the Chemistry section, which took first place in the funniest pumpkin category.



NEWS BRIEFS

Tripler schedules annual holiday ball — Tripler Army Medical Center's annual Holiday Ball will be held Dec. 14 at the Hilton Hawaiian Village.

Tickets, which will be sold in the Dining Facility beginning Nov. 19, are \$37 for E1-E6, GS1-GS6 and O1-O2; and \$42 for E7, GS7 and O3 and above.

Holiday Lighting Ceremony set — Tripler Army Medical Center will conduct its annual Holiday Lighting Ceremony at 5:30 p.m. Nov. 30 outside the hospital's Oceanside entrance.

The ceremony will include the traditional lighting of the tree and entertainment from the 25th Infantry Division (Light) Band as well.

For more information, call Sgt. Maj. Rafael Santos at 433-6646.

Schofield VTF to hold Saturday Clinic — The Schofield Barracks Veterinary Treatment Facility will hold a vaccine, microchip and sick call clinic Saturday, Nov. 17 from 8 a.m. to 1 p.m.

Pet owners may call 433-8531 or 433-8532 to schedule an appointment. Walk-ins will be welcome, but will be seen on a first come-first serve basis as time provides.

* It is recommended that pet owners bring their pet's prior medical records.

The following is a price list of the services, which will be provided during the Saturday clinic:

Dog/cat annual booster - \$10

Rabies booster - \$5

Heartworm test - \$15

Feline leukemia/ Feline AIDs test - \$22

Fecal exam - \$5

Microchip (unregistered) - \$15

Nail trim - \$5

Customers will also be charged a \$2 Department of Defense users fee.

The clinic is open to military ID cardholders to include active duty servicemembers, family members, retirees and Reservists/ National Guard personnel on active orders.

For more information on the clinic, call 433-8531.

Flu vaccine now available at military medical clinics — Tripler Army Medical Center has received

supplies of the flu vaccine to vaccinate eligible military beneficiaries.

Tripler's Allergy & Immunization Clinic hours for flu vaccine are 8 a.m. to 3 p.m. Nov. 16, 30 and Dec. 7. After Dec. 7, normal shot hours will be Wednesdays from 9 to 11 a.m. and Fridays from 9 to 11 a.m. and 1 to 3 p.m.

The shots will also be given at Primary Care Manager (PCM) sites or clinics. Patients may check with their PCM to find out times and dates of immunizations.

The Centers for Disease Control and Prevention (CDC) recommends the following personnel are at high risk for complications from influenza and need to get the vaccine:

* People ages 65 and older;

* Residents of nursing homes and other chronic-care facilities that house people of any age who have chronic medical conditions;

* Children and adults who have chronic disorders of the pulmonary or cardiovascular systems, including asthma;

* Children and adults who have required regular medical follow-up or hospitalization during the preceding year because of chronic metabolic diseases (including diabetes mellitus), renal dysfunction, hemoglobinopathies, or immunosuppression (e.g., caused by

medications or HIV);

* Persons aged 6 months to 18 years old who are receiving long-term aspirin therapy and therefore might be at risk for developing Reye Syndrome after influenza; and

* Women who will be in the second or third trimester of pregnancy during the influenza season.

Tripler Optometry Clinic moves — The majority of Tripler's Optometry Services has been relocated to the Optometry Services at Schofield Barracks Health Clinic in Building 676, between the Troop Medical Clinic and Family Practice Clinic. To set up an appointment, call 433-2778 or 433-8460.

The move frees up space at Tripler for the installation of new LASIK Eye Surgery equipment in the Ophthalmology Clinic. LASIK eye surgery will begin at Tripler some time next year on a priority basis for active-duty servicemembers referred by their command based on a priority list established by the U.S. Army Hawaii, said Navy Capt. Richard Jeffries, Tripler's deputy commander for Clinical Services.

Very limited — mainly in-hospital — optometry services will be available at Tripler.



Staff Sgt. Michelle J. Rowan

BACK FOR A VISIT

Korean War Veteran Richard Boedecker and his wife, June, of Redgranite, Wis., dropped by Tripler Oct. 15 for a quick visit. Richard, who was wounded during the war in September 1950, spent 10 days as an inpatient at Tripler before being medically evacuated back to Great Lakes Naval Station, Ill., where he spent about a year recuperating from his injuries. Although more than 50 years had passed since his last stay, Boedecker said he wanted to visit the place that had helped him along the road to recovery.